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STATEMENT OF ORGANIZA	OFFICE USE	(	
1. Name and Address of Committee Louisiana Society of Amethesiologists Blitical action Committee, Inc. 2420 Athania Parkway, Ste. 101 Metalvie, LA 70001 Check If: New Committee Monthly Filer  5. All Committee Officers and Directors (including Chairperson, Treasurer a. Name Mack Thomas, MD Chairperson Chai	3. Estimated Membership  2.50  4. Amended Statement?  Yes No  , if any, and any other committee of the commi	·	<b>15000978</b>
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)  a. Name Louisiana Society  of Anethesiologists  b. Address  2420 Athania Pkwy  financial  Supporter  Supporter			
7. All Depositories for Committee Funds (committee funds must be deposituds.)  a. Name  b. Address  Edward  Jones  Suite G  Baton Rouge	Lane	gs and loan institutions or mone	y market mutual
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: Principal Campaign Committee Subsidiary Committee			
b. Name of Candidate		c. Office Sought by the Can	didate
9. a. Name of Person Preparing Report Janna Pecqu	iet		
b. Daytime Telephone 504-841-0145		್ಲಾನಿ ೮೨	
10. WE HEREBY CERTIFY that the information contained in this STATEM and belief.  This 25 day of Saway, 2015  Augustus Augustus Signature of Committee Chairperson	- 	M-841-0145	Fig. 12
Signature of Committee Treasurer, if any	Da	vtime Telephone Number	<del></del>